Office of Aerospace Medicine

Internal Substance Abuse Program (ISAP) Quarterly Newsletter

History of the Internal Substance Abuse Program

ANNOUNCEMENT:

The Internal Substance Abuse Program website can be found at: http://www.faa.gov/avr/aam/isap

IN THIS ISSUE:

In 1986 President Ronald Reagan signed Executive Order 12564 mandating a drug-free Federal workplace. In September of 1987, the FAA initiated drug testing for employees whose jobs are categorized as critical safety or security sensitive. Drug testing consists of the following types of tests: random, preemployment, follow-up/return to duty, reasonable suspicion, post accident, and voluntary. The implementation of the random testing program affects over 29,000 employees within the FAA. The FAA tests for five types of drugs: amphetamines, marijuana, cocaine, opiates, and phencyclidine. During the past 16 years, the FAA has conducted 150,186 random drug tests that resulted in 465 verified positives. Due to the low positive rate for drugs, the Department of Transportation reduced the rate of drug testing from 50 to 25 percent in 1992.

In September 1991, the Omnibus Transportation Employee Testing Act (The Act) mandated alcohol testing for employees in positions categorized as critical safety-sensitive. The implementation of random alcohol testing affects over 28,000 employees within the FAA. Since the implementation (March 1995) of alcohol testing, the FAA has randomly tested 35,745 employees. Out of the 35,745 random alcohol tests conducted, 29 have been confirmed a positive test. The Act mandated employees who hold a Commercial Drivers License (CDL) be subject to drugs and alcohol testing. Currently, there are 80 employees who hold a CDL within the FAA that are currently affected by the Act. The Act also implemented split specimen procedures for all drug tests. This process allows employees to have their split sample (Bottle B) tested at another Department of Health and Human Services certified laboratory if the medical review officer (MRO) verifies the primary sample (Bottle A) a positive result.

Throughout the history of this program, the FAA ISAP has focused on the importance of ensuring a drug- and alcohol-free workplace. We continue to make every effort to ensure the safety and security of the flying public.

For additional ISAP information contact your regional drug program coordinator (see contact information on the ISAP website).

2002 Fiscal Year Statistics

DRUGS

Type of Test	Total Tests Conducted	Number of Positives	Positive Percent
Random	7,961	21	0.26%
Reasonable Suspicion	2	1	0.5%
Post Accident	66	0	0.00%
Return To Duty/ Follow-up	824	2	0.24%
Preemployment	2,819	0	0.00%
Total	11,672	24	0.21%

ALCOHOL

Type of Test	Total Tests Conducted	Number of Positives	Positive Percent
Random	3, 411	1	0.02%
Reasonable Suspicion	6	1	0.17%
Post Accident	43	0	0.00%
Return To Duty/ Follow-up	1,599	5	0.31%
Total	5,059	7	0.14%

*Random figures are based on 25 percent annual test rate for drugs and 10 percent annual test rate for alcohol

"A Life of Substance Abuse is Life Without Substance"

QUESTIONS AND ANSWERS

Q. Why is the split specimen approach used for urine drug testing?
A. The split specimen process provides additional protection to employees by giving them an opportunity to have their specimen retested in the event there is a verified positive test result from the primary specimen (Bottle A). The split specimen (Bottle B) is tested at a different laboratory that is also certified by the Department of Health and Human Services to conduct Federal employee drug testing. If the result of the test on the split specimen (Bottle B) fails to reconfirm the verified positive result reported for the primary specimen (Bottle A), the MRO will void the primary test result.

Q. What if an employee has a positive drug test; may the employee request a second test of a <u>new</u> specimen?
A. If an employee has a verified positive drug test result from the MRO, there is no provision or authority for the employee to take another specimen for testing. If a new specimen is tested, the MRO will not consider the information or the result of the test.

As identified in the first question response, however, all employees have the option of using the split specimen testing procedure. That is, on the initial collection of a specimen, the specimen is split into two bottles that are sealed separately (Bottle A and B). One is maintained for the purpose of a second test in a different laboratory in the event that the first is positive. The employee who has a verified positive test result, must request that Bottle B specimen be tested.

EDUCATION AND AWARENESS

CLUB DRUGS

Across the country, teens and young adults enjoy all-night dance parties known as "raves" and increasingly encounter more than just music. Dangerous substances known collectively as club drugs like ecstasy, Gamma-hydroxybutyrate, rohypnol and ketamine are gaining popularity. These drugs aren't "fun drugs." Although users may think these substances are harmless, research has shown that club drugs can produce a range of unwanted effects, including hallucinations, paranoia, amnesia, and, in some cases, death. Used in combination with alcohol, these drugs can be even more dangerous.

"Club drug" is a vague term that refers to a wide variety of drugs. Uncertainties about the drug sources, pharmacological agents, chemicals used to manufacture them, and possible contaminants make it difficult to determine toxicity, consequences, and symptoms that might be expected in a particular community. Some club drugs work on the same brain mechanisms as alcohol and, therefore, can dangerously boost the effects of both substances. Also, there are great differences among individuals in how they react to these substances. No one can predict how he or she will react. Some people have been known to have extreme, even fatal, reactions the first time they use club drugs. Because some club drugs are colorless, tasteless, and odorless, they are easy for people to slip into drinks. Some of these drugs have been associated with sexual assaults, and for that reason, they are referred to as "date rape drugs."

Drug	Street Names	Effects
Ecstasy Methylene-dioxymethamphetamine (MDMA)	X, and Adam	Young people may use Ecstasy to improve their moods over get energy to keep dancing however, chronic abuse of Ecstasy appears to damage the brain's ability to think and regulate emotion, memory, sleep, and pain.
Gamma-Hydroxybutyrate (GHB)	G, and Georgia Home Boy	May be made in homes by using recipes with common ingredients. At lower doses, GHB can relax the user, but, as the dose increases, the sedative effects may result in sleep and eventual coma or death.
Rohypnol	Roofie, and Roche	Is tasteless, odorless and mixed easily in carbonated beverages. Rohypnol may cause individuals to forget what happened. Other effects include low blood pressure, drowsiness, dizziness, confusion, and stomach upset.
Ketamine	Special K and K	Is an anesthetic. Use of a small amount of ketamine results in loss of attention span, learning ability, and memory. At higher doses, ketamine can cause delirium, amnesia, high blood pressure, depression, and severe breathing problems.